



| , | | | | Application Number | 10/8 | 10/814,332 | | |
|--|----------------|---|--|--|-------|------------------|--|--|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | | | Filing Date | April | 1, 2004 | | |
| | | | | First Named Inventor | Way | ne A. ECKERLE | | |
| | | | | Group Art Unit | 3747 | 7 | | |
| | | | | Examiner Name | Tony | / M. Argenbright | | |
| Total Number of P | ages in This S | Submission | 6 | Attorney Docket Number | 7402 | 740270-2925 | | |
| | <u> </u> |] | ENCLOSU | RES (check all that apply) | | | | |
| Fee Attached Amendment / Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) | | | Petition Petition Applicat Power of Change Termina Request | to Group Appeal Communication to Board of Appeals and Interferences to Convert to a Provisional Appeal Communication to Group | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | | | |
| Individual name Nixon Pea 401 9th St Suite 900 | | ackett, Jr., Reg. No. 36,092 abody LLP street, N.W. | | | | | | |
| Date June 9, 2005 | | | 005 | | | - | | |
| | | | | | | | | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office (Fax No. (703) 872-9306) on the date shown below. | | | | | | | | |
| Name (Print/Type) | | | | | | Γ | | |
| Signature | | Signature | | | Date | | | |

| a. | O BE ICO | | | | |
|----|---|----------------------|---------------------|--|--|
| | JUN | Complete if Known | | | |
| ÷ | Effective on 12 8/2004. Fees pursuant to the Consolidated Soft or opriations Act, 2005 (H.R. 4818). | Application Number | 10/814,332 | | |
| | Fees pursuant to the Consolidated Superopriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL | Filing Date | April 1, 2004 | | |
| | | First Named Inventor | Wayne A. ECKERLE | | |
| °. | For FY 2005 | Examiner Name | Tony M. Argenbright | | |
| | Applicant claims small entity status. See 37 CFR 1.27 | Art Unit | 3747 | | |
| | TOTAL AMOUNT OF PAYMENT (\$) 130.00 | Attorney Docket No. | 740270-2925 | | |

| ME | METHOD OF PAYMENT (check all that apply) | | | | | | | | |
|-----------|--|-------------------|----------------------|------------------|----------------------|-------------------------|-------------------|-------------|--------------------------|
| | ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): | | | | | | | | |
| × | Deposit Account Number: 19-2380 (740270-2925) Deposit Account Name: Nixon Peabody LLP | | | | | | LLP | | |
| | For the above-identif | fied deposit ac | ccount, the Di | rector is herel | by authorized to | : (check all | that apply) | | |
| | Charge fee(s) in | dicated below | ٧ | | ☐ Charge | fee(s) indica | ated below, exce | ept for tl | ne filing fee |
| | Charge any addi | | or underpayme | ents of fee(s) | 🗷 Credit a | ıny overpayı | nents | | |
| | under 37 CFR 1. | | | | | | | | , |
| | RNING: Information on thi authorization on PTO-2023 | | ome public. Cre | edit card inform | ation should not be | included on t | his form. Provide | credit card | l information |
| FE | E CALCULATION | | | | | | | | |
| 1. | BASIC FILING, SEA | RCH AND | EXAMINAT | ION FEES | | | | | |
| | | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | | |
| | A 31 41 77 | - | Small Entity | E (0) | Small Entity | T7 (4) | Small Entity | T7 | - D-: 4 (6) |
| | Application Type | Fee (\$) | <u>Fee (\$)</u> | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | ree | <u>s Paid (\$)</u> |
| | Utility | 300 | 150 | 500 | 250 | 200 | 100 | - | _ |
| | Design | 200 | 100 | 100 | 50 | 130 | 65 | | |
| | Plant | 200 | 100 | 300 | 150 | 160 | 80 | | |
| | Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | |
| | Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. Foo | EXCESS CLAIM FE | ES | | | | | | Fee (\$) | Small Entity Fee (\$) |
| | th claim over 20 or, for I | Reissues each | n claim over 2 | 0 and more th | an in the origina | al patent | | 50 | 25 |
| | h independent claim over | | | | _ | - | al patent | 200 | 100 |
| Mu | ltiple document claims | | | - | | | | 360 | 180 |
| Tota | al Claims | Extra Claims | _ | <u>Fee (\$)</u> | Fee Paid (\$) | | ole Dependent Cla | | |
| HP = | - 20 = x = Fee (\$) Fee Paid (\$) HP =- highest number of total claims paid for, if greater than 20 | | | | | | | | |
| | ep. Claims | Extra Claims | | Fee (\$) | Fee Paid (\$) | | | | |
| | - 3 = | | x | = | | | | | |
| HP = | highest number of independ | ent claims paid f | for, if greater than | 1 3 | | | | | |
| 3. | APPLICATION SIZE | | 1100 1 | | 4 | C 1 | #250 (#125 C | 11 | 414.5 |
| | If the specification and for each additional 50 | | | | | | | small en | tity) |
| | Total Sheets | Extra Sheet | | | h additional 50 or f | | | S) | Fee Paid (\$) |
| | - 100 = | | / 50 = | | (round up to a whol | | х | = | |
| 4. | OTHER FEE(S) | | | | | | | | Fees Paid (\$) |
| | Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | |
| | Other: Terminal Disc | claimer Fee | | | | | | | 130 |
| CHD | MITTED BV | | | | | | | | |

| SUBMITTED BY | | | | | | | |
|-------------------|----------------------|--|--------------------------|--|--|--|--|
| Signature | 7 | Registration No. (Attorney/Agent) 36,092 | Telephone (202) 585-8000 | | | | |
| Name (Print/Type) | Tim L. Brackett, Jr. | | Date June 9, 2005 | | | | |